

Federal Bureau of Investigation Citizens' Academy Application

2012 Class

Person	al Data
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Leg	al	N	ar	ne	:

(Last) (First) (Full Middle Name)

Preferred Name:

List all other names you have used, incl. NICKNAMES & MAIDEN NAMES:

If you have ever used any other surname or legally changed your name, state when this occurred and the circumstances. If you ever legally changed your name (other than through marriage), please list the date, place & court:

Date of Birth: Place of Birth:

Gender: Male Female Social Security number:

(Required)

Current Citizenship (country):

Acquired by: Birth Marriage Naturalization

Contact Information

Current Address:

Street City State Zip

Home Phone: Work Phone: Email address: Website:

Do you prefer to receive mailings: at home at work

In the event of an emergency, please list a contact:

Name:

Relationship: Phone:

Employment Information

Current Employer, Address

(If retired, list most recent employer and date left)

Job Title/Profession: (If retired, list previous profession)

Explain what your duties are/were and what your employer does/is/sells:

If fewer than 3 years with employer, list former employer:

(Not relatives, roommates or other current applicants): Name: Phone: Address: Street City State Zip Email address: How long have you known this person? In what capacity (friend, co-worker, etc.)? Name: Phone: Address: Street City State Zip Email address: How long have you known this person? In what capacity (friend, co-worker, etc.)? Phone: Name: Address:

Provide the names and complete contact information for 3 references

Purpose of Application

Street

How long have you known this person? In what capacity (friend, co-worker, etc.)?

Email address:

References

Please explain why you want to attend the FBI Citizens' Academy:

City

The FBI Citizens' Academy is designed for BUSINESS and COMMUNITY LEADERS. Please explain how you would, through your personal or professional leadership position(s), share the information you learn about the FBI. List any organizations or associations to which you belong:

State

Zip

Commitment

The FBI Citizens' Academy program consists of 6 evening sessions and 1 daytime session. Out of consideration to other applicants, do you agree to attend ALL sessions of the Citizens' Academy?

Other Information

How did you hear about this program?

If a graduate of this program recommended you, please state that person's name and relationship to you:

Have you ever applied for this Citizens' Academy program before?

Have you ever attended another agency's Citizens' Academy before? If so, state which one(s) and the dates:

Participation in Firearms Training

Do you now, or have you ever had, a serious illness/injury which could preclude you from safely participating in live firearms training?

Yes

No

If yes, please provide details:

Authorization to conduct Law Enforcement Check

Have you ever been CHARGED with a felony offense? Yes No Have you ever been CONVICTED of a felony Offense? Yes No If YES, list details including: date, place, law enforcement agency, charge, court and disposition:

I hereby authorize the FBI to conduct a standard check of law enforcement records on me. I understand this check will include, but not be limited to, any record of charges, prosecutions or convictions for criminal or civil offenses. This check will be used for the purpose of the FBI Citizen's Academy application process. My consent is valid for three months from the date authorized below. Any information obtained will be used for the purpose of providing clearance to participate in the FBI Citizens' Academy. *I understand that my acceptance into the Citizens' Academy is not guaranteed and is at the discretion of the FBI*.

Full name (printed) Full name (signature) Date

Return Application to: FBI Citizens' Academy, 9109 NE Cascades Parkway Portland, OR 97220 or Fax to (503) 460-8100.

Deadline for 2012 Applications: Friday, July 27, 2012

PRIVACY ACT STATEMENT AND CONSENT

Please print, sign and return one copy with your application.

Please print, sign and retain a second copy for your own personal records.

This is to advise you, in conformance with the Privacy Act of 1974, that the collection of this information is authorized under Title 28 U.S.C.533; 28 C.F.R. 0.85; Executive Order 12958, as amended by 13292; 5 U.S.C.552a(e)(10); 44 U.S.C. chapters 21 and 33; 40 U.S.C. chapter 318a; and Title 41 CFR 102-81.10 and 81.15. The furnishing of this information, including your social security number, is voluntary on your part and will be used for the purpose of providing clearance to participate in the FBI's Citizens' Academy Program. Information you provide will be protected and used in strict compliance with the Privacy Act and the routine uses most recently published in the Federal Register for the FBI's Central Records System (Justice/FBI-002) and the FBI's Blanket Routine Uses (Justice/FBI-BRU).

You are not required to execute this form; however, if you do not, this refusal may result in your application for participation in the FBI Citizens' Academy Program being rejected. Knowingly falsifying or concealing information required on this form will result in your application being rejected. In addition, Title 18 Section 1001 of the U.S. Code provides that knowingly falsifying or concealing a material fact may under certain circumstances constitute a felony resulting in fines and/or imprisonment.

(Signature of Applicant)

(Printed name of Applicant)

(Date)